

Utah Division of Solid and Hazardous Waste Solid Waste Management Program

Mailing Address P.O. Box 144880 Salt Lake City, Utah 84114-4880 Office Location 288 North 1460 West Salt Lake City, Utah 84116

Phone (801) 538-6170 Fax (801) 538-6715 www.deq.utah.gov

Waste Tire Recycler Registration Application

Pursuant to Utah Administrative Code R315-320-5, to obtain a waste tire recycler registration number and approval to act as a waste tire recycler, a recycler shall submit the following information on this form with accompanying required documentation to the Division of Solid and Hazardous Waste.

Part I Site Information APPLICANT: PLEASE COMPLETE ALL SECTIONS.														
I. Application Type Propo			osed ne	sed new facility			Renewal of registration. Current registration number Modification of registration. Current registration number							
Other, please explain														
II. Recycler Location														
Site Address (street or directions to site)										County				
City							Zip Code			Telephone				
Township	Range		Section(s)			Quarter/Quarter S		ectio	ection		Quarter Section			
Facility Latitude	degrees mir		utes seconds			Longitude degrees		degrees		minute		utes seconds		
III. Recycler Information														
Legal Name of Facility Owner														
Address (mailing)														
City				State	Code			Те	Telephone					
IV. Contact Information														
Owner Contact						Title								
Address (mailing)														
City				State			Zip Code			Telephone				
Email Address				·			Alternative Telephone (cell o			other)				
Part II General Information														
I. Area Served List all known tire transporters or tire processors supplying waste tires to the facility. Attached additional sheets if necessary.														
Name				Address									County	
II. Working Capacity of Recycling Process: Attach a detailed description of the recycling process (e.g., burning as a fuel in cement kiln) including the average number of tires that can be recycled in the process on a daily basis and the maximum annual capacity of the process. The description must include the existence or status of any equipment used in the process, the existence or status of any contracts required, and the existence or status of any local permits needed for the operation. (A recycling certificate cannot be granted to a facility that does not meet the definition of recycler in UCA 19-6-803(18) and where equipment and contracts are not in place)								any						

III. Fee and Other Documents		
Is Recycler Currently Registered with a Local Health Department Yes 🗌 (Pleas	lo Registration Fee: Amount \$	
Insurance: Name of Company Issuing Policy Liab	ility Amount Covered	Policy Expiration
Registration Fee: The Utah Legislature, in the Annual Appropriation Act, has approrecycler. The fee must be submitted with this application. Note Utah Administrative tire recycler that has a valid registration from a local health department within Utah.	e Code R315-320-5(7)(b) allows a	
I HEREBY CERTIFY THAT THIS INFORMATION AND ALL ATTA	CHED PAGES ARE CORF	RECT AND COMPLETE.
Signature of Authorized Owner Representative	Title	Date
	Address	
Name typed or printed		
Signature of Authorized Operator Representative (if applicable)	Title	Date
	Address	
Name typed or printed		
For Division of Solid and Hazardous Waste use only Certificate Number	Expiration l	Date